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## 6-2-06 EVASS945695US;

7	· AMEN	Docket No. UAB-15102/22									
	Application No. 10/049,327-Conf. #3596		Filing ( May 15,		Examiner L. M. William		Art Unit 1617				
IJ	pplicant(s): Jay										
r	Method	of treating trai	umatic brain at	nd spinal core	f injuries and other	neurogen	ic conditions				
	using n				naturally occurring o	conotoxins	<u> </u>				
	Transmitted here	· -	THE COMMI								
	The fee has been										
				S AS AMENI	DED						
		Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate						
	Total Claims Independent	19	- 35 =		×		·.				
	Claims	4	- 4 =		X						
	Muitiple Depend	lent Claims (ch	eck if applicabl	e)							
	Other fee (please specify):										
l	TOTAL ADDIT	ONAL FEE FO	OR THIS AME	NDMENT:		<u> </u>	0.00				
	Large Entity				x Small Entity	•					
	x No additional fee is required for this amendment.										
	Please charge Deposit Account No in the amount of \$  A duplicate copy of this sheet is enclosed.										
	A check in the amount of \$ to cover the filing fee is enclosed.										
	Payment by credit card. Form PTO-2038 is attached.										
·	The Director is hereby authorized to charge and credit Deposit Account No07-1180 as described below. A duplicate copy of this sheet is enclosed.										
	as described below. A duplicate copy of this sheet is enclosed.  X Credit any overpayment.										
x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.											
2 h Will											
	Avery/N. Golds	tein	<u> </u>		Dated:	June 1	, 2006				
	Attorney/Agent		204								
	GIFFORD, KRASS, GROH. SPRINKLE, ANDERSON & CITKOWSKI, P.C. 2701 Troy Center Drive, Suite 330 Post Office Box 7021										
	Troy, Michigan (248) 647-6000	48007-7021									
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